

# PEDIATRIC CARDIAC INTENSIVE CARE SOCIETY

## PCICS QUALITY COMMITTEE

### TERMS OF REFERENCE

- NUMBER OF MEMBERS:** The number of members may vary with time, but it will be limited to a maximum of twelve (12), including the two Co-Chairs.
- METHOD OF APPOINTMENT:** The PCICS Board of Directors shall appoint two Committee Co-Chairs. The remaining members will be selected from a list of nominees or volunteers by the Co-Chairs. The Committee membership must then be ratified by the PCICS Board of Directors. Committee members shall include a mix of senior physicians, junior physicians, and at least two nurses and/or allied health professionals. At least one Committee member shall be based outside of North America. All Committee members must be active members of the PCICS.
- TERM OF OFFICE:** Members shall serve four-year terms beginning June 1<sup>st</sup> 2015 and shall be staggered for continuity. Half of the founding members will serve 2 years to facilitate this process. Past-Chairs will serve as immediate-past chairs on the committee for 2 years following the completion of their periods as Chairs. Committee members may be allowed shorter duration of appointment at the discretion of the Chairs.
- FREQUENCY OF MEETINGS:** The Committee shall meet face-to-face once per year in conjunction with the annual PCICS conference. Conference calls will occur monthly. The time commitment will vary, but on average, it should not exceed five (5) hours/month.
- RESPONSIBILITIES:**
- Committee Responsibilities:
1. Participate in 9/12 (75%) of the monthly conference calls and attend at least one out of two annual PCICS conferences in a two-year period.
  2. Contribute to the establishment of evidence-based quality metrics endorsed by the PCICS Board that can be used by pediatric CICUs around the world as indicators of quality outcomes in pediatric cardiac intensive care. These indicators are expected to change over time as clinical practice evolves.
  3. Collaborate with other entities that are dedicated to quality practices in pediatrics and intensive care.
  4. Develop educational materials endorsed by the PCICS Board that provide instruction for CICU practitioners on best practices related to these quality metrics (e.g., tracking tools and checklists).
- Co-Chairs' Responsibilities:
1. Select committee members from nominees and volunteers for approval by the PCICS Board.
  2. Draft monthly meeting agendas, create meeting minutes and action plans for work agreed upon by the members, assign work responsibilities to members, and report on the Committee's work to the PCICS Board.
- FIRST Co-CHAIRS** Stephen Roth, Steven Schwartz